



TTEC Launches TTEC VeriCycle, an AI-Powered Healthcare Claims Intelligence Solution to Reduce Denials and Accelerate Reimbursement

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New healthcare solution helps payers and providers improve claims accuracy, prevent denials, and optimize reimbursement outcomes

AUSTIN, Texas, June 11, 2026 (GLOBE NEWSWIRE) -- **TTEC**, a leading global consulting, technology, and managed services company delivering solutions at the intersection of data, AI, and customer experience (CX), today announced the launch of **TTEC VeriCycle**, its AI-powered claims validation and contact center empowerment solution designed to help healthcare organizations identify and resolve claims issues before submission, improve claims accuracy, reduce denials, and accelerate reimbursement.

Healthcare organizations face growing pressure from rising denial rates, reimbursement complexity, staffing shortages, prior authorization requirements, and escalating administrative costs. Many continue to rely on fragmented workflows that make it difficult to identify claims issues until late in the reimbursement process, resulting in avoidable rework, delayed payments, and revenue leakage.

TTEC VeriCycle is **designed for both payer and provider organizations** and helps operational teams reduce manual effort and create more predictable reimbursement outcomes. By combining AI-powered automation, workflow intelligence, healthcare analytics, and operational expertise, the solution helps identify eligibility mismatches, prior authorization gaps, coding discrepancies, documentation issues, and other reimbursement risks before claims are submitted.

“Denial management and rework associated with claims and reimbursement issues can pose significant revenue and cost challenges for payers and providers. They also add friction to the payer-provider relationship,” said **Partha Deka, senior vice president of TTEC’s healthcare portfolio**.

“TTEC VeriCycle helps organizations get ahead of these challenges, address issues more quickly, and build greater trust among payers, providers, and patients.”

TTEC VeriCycle supports key **healthcare revenue cycle management** functions, including:

- Eligibility verification and benefits validation
- Prior authorization support
- Medical coding assistance
- Claims validation and submission optimization
- Claims denial prevention and management
- Accounts receivable posting and reconciliation
- Revenue cycle analytics and reporting

Combining AI with Human Healthcare Expertise

The solution pairs AI-powered claims management capabilities with experienced healthcare specialists who help investigate exceptions, resolve issues, and execute workflows. Real-time contact center dashboards and healthcare analytics provide visibility into denial trends, accounts receivable performance, revenue leakage risks, reimbursement outcomes, and operational bottlenecks.

Preventing Denials Before They Happen

Unlike traditional revenue cycle solutions that focus primarily on managing denials after claims are rejected, TTEC VeriCycle takes a proactive approach that helps healthcare organizations identify and resolve claims issues before submission to clearing houses and payer adjudication systems.

“Catching claim issues before they are submitted—and validating them against payer policies and provider contracts in real time—can significantly reduce the administrative burden on the system,” said **Paddu Srinivasan, vice president and client-success partner at TTEC**.

For more information about TTEC VeriCycle, visit www.ttec.com/services/vericycle.

About TTEC

TTEC Holdings, Inc. (NASDAQ: TTEC) is a leading global consulting, technology, and managed services company delivering solutions at the intersection of data, AI, and customer experience. Serving iconic and disruptive brands, TTEC’s outcome-based solutions span the entire enterprise, touch every virtual interaction channel, and improve each step of the customer journey. Leveraging next-generation digital technology, the Company’s TTEC Digital business designs, builds, and operates omnichannel contact center technology, CRM, AI, and analytics solutions. The Company also delivers AI-enhanced customer engagement, customer acquisition and growth, tech support, back-office, and fraud prevention services. Founded in 1982, TTEC’s singular obsession with CX excellence has earned it leading client, customer, and employee satisfaction scores across the globe. The Company’s employees operate on six continents and bring technology and humanity together to deliver happy customers and differentiated business results. To learn more, visit <https://ttec.com>.

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